



**JJS GROUP TRAINING ATTENDANCE  
& REPORTING FORM**  
(Revised 07/01/04)

**FOR COMPUTER USE ONLY**

Date Entered:

Event Number:

Type of Training (Circle One)		M-Mandatory N-Non-mandatory			
Name of Training					
Date(s) of Training					
Location					
Instructor					
Length of Training (hours)					
Name (Please Print) FirstLast		Facility/Program	Employee Identification Number	Social Security Number	Test Score
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
Approving Signature:			Facility/Program		

**This form must be filled out completely. Keep a copy for your records.  
Send original to JJS Training Center, 3522 S 700 W, Salt Lake City, Utah 84119  
This is an official Division document – falsification is a violation of the Code of Ethics.**